Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL	ENTITY	OR	OTHER THAN		
FOR			NUMB	ER FILED		NUMBER	EXTRA		RATE	FEE	7	RATE	FEE
B	ASIC FEE									380.00	OR		760.00
TC	OTAL CLAIMS		24	minus	20=	• (1		X\$ 9=	36	OR	X\$18=	
INI	DEPENDENT C	:LAIMS	6	minus	3 =	• • 3			X39=	117	OR	X78=	
ML	MULTIPLE DEPENDENT CLAIM PRESENT								+130=		OR	+260=	
• If	* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL	533	OR	TOTAL	
	C		IS AS A lumn 1)	AMENDE		PART II Column 2)	(Column 3)		SMALL	ENTITY	OR	OTHER SMALL	
	T		AIMS			JOIUMN 2) HIGHEST	1 7	-			• · ·		
ENT A	·	REM.	IAINING FTER NDMENT		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total -		29.	Minus	**	24	= 5		X\$ 9=	4500	OR	X\$18=	
AME	Independent FIRST PRESE	*	6 N OF M	Minus	PEND		= _		X39=		OR	X78=	
	,	NINIE	N Or m.	JLI IPLE UL.	-EIVL	ENICENIE			+130= .		OR	+260=	
								_	TOTAL	1.00 1	\mathscr{U}_{-}	TOTAL	<u> </u>
	,								DDIT. FEE	4500 1	OR ,	ADDIT. FEE	
			umn 1)		(C	Column 2)	(Column 3)		-		-		
. 0			AIMS			HIGHEST		г		ADDI-	ľ		450
	, ,		AINING TER	}		NUMBER	PRESENT		RATE				ADDI-
	, !	1	IDMENT			REVIOUSLY PAID FOR	EXTRA		HAIL	TIONAL		RATE	TIONAL
MENDMENT	Total	*		Minus	**		=	r	X\$ 9=	FEC	OR	X\$18=	FEE
¥	Independent	•		Minus	***		=	⊦			F		
	FIRST PRESE	NTATIO	N OF ML	JLTIPLE DEF	PEND	ENT CLAIM		-	X39=		OR	X78=	
									+130=		OR	+260=	
		•						AΓ	TOTAL DIT. FEE		OR .	TOTAL	
	(Column 1) (Column 2) -(Column 3)								JUIT. FEG .			DDIT. FEE	
T			AIMS			olumn 2)	(Column 3)	_		. <u> </u>			
2	1	REMA	NING			NUMBER	PRESENT			ADDI-	Γ		ADDI-
2	Į.		TER	j į	_	EVIOUSLY	EXTRA	1	RATE	TIONAL		RATE	TIONAL
<u>₽</u> ⊢		AMENL	DMENT		P/	AID FOR		L		FEE	1	· · · · ·	FEE
<u> </u>		•		Minus	**		Ė		X\$ 9=		OR	X\$18=	
£		•		Minus	***		=		X39=		ŀ		
1	FIRST PRESEN	NTATIO	N OF MU	LTIPLE DEP	END	ENT CLAIM		<u> </u>	₩2=		OR	X78=	
- H	If the entry in column 1 is less than the entry in column 2 write for in column 2							+130=	·	OR	+260=		
- 11	"I the highest number Previously Paid For" IN THIS SPACE is loss than 20 and 100 PM.									OR	TOTAL		
The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE													

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or [Oocket Number
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09/245,625

(Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
то	TAL CLAIMS						_	RATE	FEE) 	RATE	FEE
FOR			NUMBER	NUMBER FILED		NUMBER EXTRA		ASIC FEE	355.00		BASIC FEE	710.00
-	TAL CHARGEA	RI E CI AIMS	24		· M		F			OH		710.00
			/	ius 20=				X\$ 9=	63,00	OR	X\$18=	
	EPENDENT CL		5 minus 3 =			2		X40=	80,00	OR	X80=	
		DENT CLAIM PI						+135=	-	OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL	498,00	OR	TOTAL	
4	CI	LAIMS AS A	MENDED - PART II							-	OTHER THAN	
	/.	(Column 1) CLAIMS		(Colur		(Column 3)	· •	SMALL E		OR	SMALL	
AMENDMENT X		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9= X40=		OR	X\$18=	
AME	Independent	*	Minus	***						OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDEN	CLAIM		י ד	+135=		OR	+270=	
							L	TOTAL			TOTAL ADDIT. FEE	
					01	(0.1	ΑC	DDIT. FEE	L	1011	ADDIT. FEE	
		(Column 1) CLAIMS		(Colu		(Column 3)	1 -		ADDI	ı		ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
NDM	Total	*	Minus	**	•	=	\prod	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	╽┟	X40=		OR	X80=	
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
• 1	f the entry in colu	mn 1 is loss than t	he entry in colu	ımn 2 writ	e "()" in cc	olumn 3.	L	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										<u> </u>		